# Application for Graduation

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| Please indicate the degree that you are earning: |
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| **MA [ ]** | **MAEd [ ]** | **MAT [ ]** | **MBA [ ]** | **MPA [ ]** | **MSA [ ]** | **MSN [ ]** | **MSW [ ]** |  |

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| Fall [ ]   | [ ]  Summer I |
| Spring [ ]   | [ ]  Summer II |

 Anticipated Date of Graduation: Year Completing: Click here to enter text. |

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| \*\*\* Enrollment in the University is required the semester you graduate. \*\*\* |
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| ***Enter the following information.*** |
| Major: Click here to enter text. Concentration: Click here to enter text. Request Date: Click here to enter text. |
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| Name: Click here to enter text. Banner ID: Click here to enter text. BraveMail: Click here to enter text. |
| Street Address: Click here to enter text. City: Click here to enter text. State: Click here to enter text. |
| Zip: Click here to enter text. Cell Phone: Click here to enter text.  |
| **Call the Bursar’s Office at 910.521.6855 to make your payment:****Receipt Number**: Click here to enter text. **Person Paid in the Bursar’s Office**: Click here to enter text. **Date Paid:** Click here to enter text. |  |  |  |  |
| ***Your name will appear on your diploma as it does in the BraveWeb system***. To change your name in the BraveWeb system, submit a completed *Name Change* form at [http://tinyurl.com/UNCP-Grad-Forms](http://www.uncp.edu/registrar/forms) to The Graduate School. ***Graduation Application Fee***: $100 if paid by the deadline (Oct 1st for Spring, March 1st for Summer/Fall). *After the deadline, there is an additional $25 late fee (total of $125)*.***NOTE:*** The ***Graduate Exit Survey*** link will be emailed to you approximately one month prior to your graduation. This survey is part of your Graduation checklist and completion is monitored. ***When the form is complete and the fee paid, email the completed form to*** [***grad@uncp.edu***](file:///C%3A%5CUsers%5Cbumin%5CAppData%5CLocal%5CPackages%5CMicrosoft.MicrosoftEdge_8wekyb3d8bbwe%5CTempState%5CDownloads%5Cgrad%40uncp.edu)***.*** |
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| ***\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\******Office Use Only** |
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| Received By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Processed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

 *Revised 09/27/2019 gl*